Fill in t	his infor	mation to identify you	r case:			
Debtor		Linda L Martin				
Dobioi	•	First Name	Middle Name	Last Name		
Debtor		First Name	Middle Name	Lost Nama		
(Spouse it		First Name		Last Name		
United	States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT O	OF INDIANA		
Case n	umber	18-91847-BHL				
(if known)	_				-	Check if this is an imended filing
State	ement		Affairs for Individ			4/16
informa	tion. If n		attach a separate sheet to		equally responsible for sup additional pages, write you	
Part 1:	Give	Details About Your Ma	rital Status and Where You	Lived Before		
1. Wh	nat is you	ır current marital statu	is?			
■	Married Not ma					
2. Du	ring the	last 3 years, have you	lived anywhere other than	where you live now?		
■	No Yes. Li	st all of the places you l	ived in the last 3 years. Do no	ot include where you live now		
De	ebtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and V	
		ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Expla	in the Sources of You	r Income			
Fill	in the tot	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	No					
	Yes. Fi	ll in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			■ Wages, commissions, bonuses, tips	\$14,870.03	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.										
	List	each s	source and th	he gross inco	me from ea	ach source sep	arately. Do	not include income	that you listed in lir	ne 4.	
		No	<b>-</b> 911- de  - de	1-7-							
	-	Yes.	Fill in the de	taiis.							
					Debtor 1				Debtor 2		
					Sources Describe	of income below.	each (before	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
			1 of currer iled for ban	nt year until kruptcy:	SSDI Be	enefits		\$12,624.00			
			dar year: December 3	31, 2017 )	SSDI Be	enefits		\$12,624.00			
			dar year bef December 3		SSDI Be	enefits		\$12,624.00			
Pa	rt 3:	List	Certain Pa	yments You	Made Bef	ore You Filed f	or Bankrup	otcy			
6.	Are □	<b>eithe</b> r No.	Neither De	btor 1 nor D	ebtor 2 ha	rimarily consults primarily co	nsumer del	ots. Consumer deb	ots are defined in 11	U.S.C. § 101	(8) as "incurred by an
			During the No.	90 days befo Go to line 7	•	for bankruptcy	v, did you pa	y any creditor a tot	al of \$6,425* or mo	re?	
			Yes	paid that cre not include	editor. Do r payments t	not include payr to an attorney fo	nents for do or this bankı	mestic support obli ruptcy case.	igations, such as ch	nild support ar	ne total amount you nd alimony. Also, do
		Yes.	Debtor 1 o	r Debtor 2 o	r both hav	e primarily co	nsumer del	ots.	n or after the date of all of \$600 or more?		
			J	30 days belo	re you med	i ioi balikiupicy	, ala you pa	y arry creditor a tot	al of \$000 of filore:	ı	
			■ No.	Go to line 7							
			□ Yes		ments for c	domestic suppo			nd the total amount opport and alimony.		creditor. Do not nclude payments to an
	Cre	editor'	s Name and	I Address		Dates of pay	ment	Total amount paid	Amount you still owe	Was this p	ayment for
7.	<i>Insi</i> o	ders in hich yes siness	clude your re ou are an off	elatives; any ficer, director	general pa person in	rtners; relatives control, or own	of any general of 20% or	eral partners; partners partner of their votin		u are a gener ny managing	ral partner; corporations agent, including one for
		No									
		Yes.	List all paym	ents to an in	sider.						
	Ins	ider's	Name and	Address		Dates of pay	ment	Total amount paid	Amount you still owe	Reason for	r this payment
								P.1.2	2		

Debtor 1 Linda L Martin

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8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost	•		yments or transfer a	any property	on account of a d	ebt that benefited an			
	■ No									
	☐ Yes. List all payments to an insider									
	Insider's Name and Address	Dates of	payment	Total amount paid	Amount y		this payment ditor's name			
Par	t 4: Identify Legal Actions, Repossession	ns, and Fore	eclosures							
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.									
	□ No									
	Yes. Fill in the details.									
	Case title	Nature of	the case	Court or agency		Status of the	10 C360			
	Case number	Nature of	tile case	Court of agency		Otatus Of th	ic case			
	Cascade Funding Mortgage Trust vs Linda Martin	Suit on a	account	Lawrence Circ 916 15th St. #3		☐ Pending ☐ On appe				
	47C01-1807-MF-000911			Bedford, IN 47	=	■ Conclud				
						Judgmen	t			
	<ul> <li>Check all that apply and fill in the details below.</li> <li>No. Go to line 11.</li> <li>Yes. Fill in the information below.</li> </ul>									
	Creditor Name and Address	Describe	the Property	1		Date	Value of the property			
		Explain v	vhat happene	ed						
11.	Within 90 days before you filed for bankrul accounts or refuse to make a payment bed  No  Yes. Fill in the details.			cluding a bank or fir	nancial insti	tution, set off any	amounts from your			
	Creditor Name and Address	Describe	the action th	ne creditor took		Date action was taken	Amount			
12.	Within 1 year before you filed for bankrupt			perty in the possess	ion of an as	signee for the ben	efit of creditors, a			
	court-appointed receiver, a custodian, or a	mother offic	iai ?							
	■ No □ Yes									
Par	t 5: List Certain Gifts and Contributions									
13.	Within 2 years before you filed for bankrup	tcy, did you	ı give any gif	its with a total value	of more tha	n \$600 per person	?			
	<ul><li>No</li><li>☐ Yes. Fill in the details for each gift.</li></ul>									
	Gifts with a total value of more than \$600	Dates you gave	Value							
	per person					the gifts	value			
	Person to Whom You Gave the Gift and Address:									

Debtor 1 Linda L Martin

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14.	Within 2 years before you filed for bank  ■ No	kruptcy, c	lid you give any gifts or contributior	ns with a total	value of more than	\$600 to any charity?			
	<ul><li>Yes. Fill in the details for each gift or</li></ul>	contributi	on.						
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you contributed		Dates you contributed	Value			
Par	6: List Certain Losses								
	Within 1 year before you filed for bankr or gambling?	uptcy or	since you filed for bankruptcy, did y	ou lose anytl	ning because of the	ft, fire, other disaster			
	■ No								
	Yes. Fill in the details.	D	h f - d - l		Data afarana	Malara af manananta			
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the log the amount that insurance has paid. Log claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost			
Par	7: List Certain Payments or Transfe			. roperty.					
	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition  No Yes. Fill in the details.	r preparir	ng a bankruptcy petition?			rty to anyone you			
	Person Who Was Paid		Description and value of any prop	ortv	Data navment	Amount of			
	Address Email or website address Person Who Made the Payment, if Not	You	transferred	erty	Date payment or transfer was made	payment			
	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.								
	■ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment			
	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a second in the course of th	our busin ers made a	ess or financial affairs? as security (such as the granting of a s						
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made			
	Person's relationship to you			paid iii ox					
	Within 10 years before you filed for bar beneficiary? (These are often called asso			elf-settled tru	st or similar device	of which you are a			
	Yes. Fill in the details.								
	Name of trust		Description and value of the prope	erty transferre	ed	Date Transfer was made			

Debtor 1 Linda L Martin

Debtor 1 Linda L Martin Case number (if known) 18-91847-BHL

Par	t 8: List of Certain Financial Accounts, In	struments, Safe Depos	it Boxes, and Sto	rage Units					
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accou	ınts; certificates	of deposit; sl		, ,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accourant instrument	cle	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, an	y safe depos	it box or other deposite	ory for securities,			
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?			
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?								
	■ No □ Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control	for Someone Else							
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe the	property	Value			
Par	t 10: Give Details About Environmental Info	ormation							
For	the purpose of Part 10, the following definiti	ons apply:							
	Environmental law means any federal, state toxic substances, wastes, or material into the regulations controlling the cleanup of these	he air, land, soil, surfac	e water, ground						
	Site means any location, facility, or property to own, operate, or utilize it, including dispose	•	environmental la	w, whether y	ou now own, operate,	or utilize it or used			
	Hazardous material means anything an env hazardous material, pollutant, contaminant		as a hazardous	waste, hazaro	dous substance, toxic	substance,			
Rep	ort all notices, releases, and proceedings th	at you know about, reg	ardless of when	they occurre	d.				
24.	Has any governmental unit notified you that	t you may be liable or p	otentially liable (	under or in vi	olation of an environm	ental law?			
	■ No □ Yes. Fill in the details.								
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, ZIP Code)		Environm know it	nental law, if you	Date of notice			

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Del	otor	1 Linda L Martin		Case number (if known)	18-91847-BHL					
25.	На	ve you notified any governmental unit of	any release of hazardous material?							
		No Yes. Fill in the details.								
		ame of site ddress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law know it	, if you Date of notice					
26.	На	ve you been a party in any judicial or ad	ministrative proceeding under any envir	ronmental law? Include	e settlements and orders.					
		No Yes. Fill in the details.								
	_	ase Title ase Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case					
Pai	rt 11	Give Details About Your Business or	Connections to Any Business							
		thin 4 years before you filed for bankrup	·	y of the following conn	nactions to any business?					
21.	VVI		in a trade, profession, or other activity,	•	•					
			pany (LLC) or limited liability partnershi	-						
		☐ A partner in a partnership	carry (LLO) or minited hability partnershi	p (LLI )						
		☐ An officer, director, or managing ex	vecutive of a cornoration							
		☐ An owner of at least 5% of the voting or equity securities of a corporation								
	No. None of the above applies. Go to Part 12.									
	_	Yes. Check all that apply above and fill in the details below for each business.								
		res. Check all that apply above and fil usiness Name	Describe the nature of the business	Employer Identific	cation number					
	Address (Number, Street, City, State and ZIP Code)				ocial Security number or ITIN.					
	,.,	amber, occes, only, orace and 2.11 code,	Name of accountant or bookkeeper	Dates business e	xisted					
28.		thin 2 years before you filed for bankrup stitutions, creditors, or other parties.	tcy, did you give a financial statement to	o anyone about your b	usiness? Include all financial					
		No								
		Yes. Fill in the details below.								
		ame ddress	Date Issued							
	(N	umber, Street, City, State and ZIP Code)								
Pai	rt 12	Sign Below								
are with	true ı a k	ead the answers on this <i>Statement of Fix</i> e and correct. I understand that making a pankruptcy case can result in fines up to C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, c	or obtaining money or p						
		da L Martin								
		L Martin ure of Debtor 1	Signature of Debtor 2							
Dat	te .	December 20, 2018	Date							
Did ■ N	10	ı attach additional pages to <i>Your Statem</i>	ent of Financial Affairs for Individuals F	iling for Bankruptcy (O	Official Form 107)?					
Did ■ N	-	ı pay or agree to pay someone who is no	t an attorney to help you fill out bankru	ptcy forms?						
	es.	Name of Person Attach the <i>Bankra</i> orm 107 <b>Staten</b>	uptcy Petition Preparer's Notice, Declarationent of Financial Affairs for Individuals Filing	•	al Form 119). page					

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Debtor 1 Linda L Martin Case number (if known) 18-91847-BHL

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<b>-</b> #11	in this info	ermation to identify you	r oose and thi	o filino					
		ermation to identify you	r case and this	s IIIIIIg	•				
Jeb	tor 1	Linda L Martin First Name	Middle N	Name	Last Name				
	tor 2								
(Spoi	use, if filing)	First Name	Middle N	Name	Last Name				
Unit	ed States E	Bankruptcy Court for the:	SOUTHERN	DIST	RICT OF INDIANA				
Cas	e number	18-91847-BHL							☐ Check if this is an amended filing
_		orm 106A/B							
<u>50</u>	hedu	ıle A/B: Pro <sub>l</sub>	perty						12/15
	you own o	r have any legal or equital art 2. e is the property?							
1.1		2585 Tunnelton Bono Road Street address, if available, or other description			is the property? Check all th Single-family home Duplex or multi-unit buildin Condominium or cooperati	g	Do not deduct secured claims or exemption the amount of any secured claims on Sche Creditors Who Have Claims Secured by Programme Company of the Company of		
	Mitchell	IN 47	<b>7446-0000</b> ZIP Code		Manufactured or mobile ho	ome	Current value of entire property?		Current value of the portion you own?
	City	Side	211 0000		Timeshare Other	anti 2 Ohaah ara	Describe the nat	ture of yo	our ownership interest ency by the entireties, or
				WIIO	nas an interest in the prop  Debtor 1 only	erty? Check one	Fee simple ti		le owner
	Lawrence	e			Debtor 2 only				
	County				Debtor 1 and Debtor 2 only At least one of the debtors information you wish to a rty identification number:	and another	(see instruction		munity property
				3 Be	droom, 2 Bathroom	Modular Home	on 3 acres		
	pages you —	ollar value of the portio have attached for Part	n you own for 1. Write that n	all of y	our entries from Part 1	, including any o	entries for =>		\$74,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

■ No

☐ Yes. Describe.....

9. Equipment for sports and hobbies

De	btor 1	Linda L Mar	tin		Case number (if known)	18-91847-BHL
	☐ Yes.	Describe				
10.	Firearm Examp		s, shotguns, ammunition, and r	elated equipment		
	■ No					
	☐ Yes.	Describe				
	□ No	les: Everyday cl	othes, furs, leather coats, desig	gner wear, shoes, accessories		
	Yes.	Describe				
			Used clothing Location: 2585 Tunnelto	on Bono Road, Mitchell IN 4744	6	\$300.00
	■ No		ewelry, costume jewelry, engage	ement rings, wedding rings, heirloom	jewelry, watches, gems, ξ	old, silver
	Non-far	rm animals	Made have			
	■ No	les: Dogs, cats, Describe	birds, norses			
	Any oth ■ No	ner personal an	nd household items you did n	ot already list, including any health	n aids you did not list	
	☐ Yes.	Give specific inf	formation			
15				rt 3, including any entries for page	s you have attached	\$2,100.00
		scribe Your Finan		(4, (4, 1, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2, 2,		
Do	you ow	n or have any l	legal or equitable interest in a	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No ·		have in your wallet, in your hon	ne, in a safe deposit box, and on hand	d when you file your petiti	on
					Cash Location: 2585 Tunnelton Bono Road, Mitchell IN	••••
					47446	\$20.00
				unts; certificates of deposit; shares in with the same institution, list each.	credit unions, brokerage l	nouses, and other similar
				Institution name:		
			17.1. Checking	PNC		\$300.00

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Del	btor 1	Linda L M	artin			Case number (if known)	18-91847-BHL
_	Ехатр		s, or publicly tradeds, investment according		ge firms, money market accounts		
	No		10-0				
L			Instituti	on or issuer name			
19.	Non-pu joint ve		stock and interes	ts in incorporated	d and unincorporated businesse	es, including an interest	in an LLC, partnership, and
I	No						
[	□ Yes.	Give specific	information about the Name of er			% of ownership:	
_	Negotia Non-ne	able instrume	nts include personal	l checks, cashiers'	e and non-negotiable instrumen checks, promissory notes, and m to someone by signing or delivering	oney orders.	
	No						
L	→ Yes. (	Give specific i	nformation about th Issuer nam				
21.		nent or pensi ples: Interests		gh, 401(k), 403(b)	, thrift savings accounts, or other p	pension or profit-sharing p	lans
ı	No						
[	□ Yes. l	List each acco	ount separately. Type of accou	unt:	Institution name:		
	Your sh Examp	hare of all unu	nd prepayments used deposits you hants with landlords, p	ave made so that prepaid rent, public	ou may continue service or use for utilities (electric, gas, water), tele	rom a company communications compani	es, or others
	No				Institution name or individual:		
L	→ Yes				Institution name or individual:		
	Annuiti ■ No	ies (A contrac	t for a periodic payr	ment of money to y	ou, either for life or for a number of	of years)	
[	☐ Yes		Issuer name and d	escription.			
3	26 U.S.C		ation IRA, in an acc ), 529A(b), and 529		ed ABLE program, or under a qu	ualified state tuition pro	gram.
	■ No □ Yes		Institution name ar	nd description. Sep	arately file the records of any inte	erests.11 U.S.C. § 521(c):	
_	Trusts, ■ No	equitable or	future interests in	property (other t	han anything listed in line 1), ar	nd rights or powers exer	cisable for your benefit
_	_	Give specific	information about th	nem			
_					er intellectual property m royalties and licensing agreeme	ents	
[	☐ Yes.	Give specific	information about th	nem			
27.			s, and other gener permits, exclusive lid		e association holdings, liquor lice	nses, professional license	s
	■ No □ Yes.	Give specific	information about th	nem			
Mo	nov or r	property owe	d to you?				Current value of the
IVIO	riey or p	property owe	u to you!				portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refu	unds owed to	o you				
	No		-				
г	¬ v /	O:::::- :		حاسية ماليمانية مناحد	than you already filed the returns	and the toy years	

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

De	ebtor 1	Linda L Martin	Case number (if known)	18-91847-BHL
29.	Examp	r <b>support</b> ples: Past due or lump sum alimony, spousal support, c	hild support, maintenance, divorce settlement, property	settlement
	■ No □ Yes.	Give specific information		
30.		amounts someone owes you  oles: Unpaid wages, disability insurance payments, disa  benefits; unpaid loans you made to someone else	ability benefits, sick pay, vacation pay, workers' comper	sation, Social Security
	_	Give specific information		
		sts in insurance policies bles: Health, disability, or life insurance; health savings	account (HSA); credit, homeowner's, or renter's insuran	се
	☐ Yes.	Name the insurance company of each policy and list its Company name:	s value. Beneficiary:	Surrender or refund value:
	If you a some o	terest in property that is due you from someone whare the beneficiary of a living trust, expect proceeds from the has died.  Give specific information	o has died m a life insurance policy, or are currently entitled to rece	ive property because
	Examp ■ No	s against third parties, whether or not you have filed of the of the offices. Accidents, employment disputes, insurance claims.		
	■ No	contingent and unliquidated claims of every nature,  Describe each claim	including counterclaims of the debtor and rights to	set off claims
		nancial assets you did not already list		
		Give specific information		
36		the dollar value of all of your entries from Part 4, incart 4. Write that number here		\$320.00
Pa	rt 5: De	scribe Any Business-Related Property You Own or Have a	n Interest In. List any real estate in Part 1.	
_		own or have any legal or equitable interest in any business o to Part 6.	s-related property?	
_	_	Go to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Propert ou own or have an interest in farmland, list it in Part 1.	y You Own or Have an Interest In.	
46.	•	own or have any legal or equitable interest in any	farm- or commercial fishing-related property?	
	_	Go to Part 7.  Go to line 47.		
Pa	rt 7:	Describe All Property You Own or Have an Interest in Th	at You Did Not List Above	
	Examp	have other property of any kind you did not alread bles: Season tickets, country club membership	y list?	
	■ No □ Yes.	Give specific information		

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Debtor 1 Linda L Martin		Case number (if known)	18-91847-BHL
54. Add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$74,000.00
56. Part 2: Total vehicles, line 5	\$2,625.00		
57. Part 3: Total personal and household items, line 15	\$2,100.00		
58. Part 4: Total financial assets, line 36	\$320.00		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54 +	\$0.00		
62. <b>Total personal property.</b> Add lines 56 through 61	\$5,045.00	Copy personal property to	stal <b>\$5,045.00</b>
63. <b>Total of all property on Schedule A/B</b> . Add line 55 + line 62			\$79,045.00

Fill in this info	Il in this information to identify your case:								
Debtor 1	Linda L Martin								
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States E	Bankruptcy Court for the:	SOUTHERN DISTRIC	Γ OF INDIANA						
Case number	18-91847-BHL								
(if known)					☐ Check if this is an				
					amended filing				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on	Current value of the	Am	ount of the exemption you claim	Specific laws that allow exemption	
Schedule A/B that lists this property	portion you own				
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
2585 Tunnelton Bono Road Mitchell, IN 47446 Lawrence County	\$74,000.00		\$4,814.00	Ind. Code § 34-55-10-2(c)(1)	
3 Bedroom, 2 Bathroom Modular Home on 3 acres Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
2006 Ford Escape 179,000 miles Location: 2585 Tunnelton Bono	\$2,625.00		\$2,625.00	Ind. Code § 34-55-10-2(c)(2)	
Road, Mitchell IN 47446			100% of fair market value, up to		
The value has been estimated by the N.A.D.A Bluebook			any applicable statutory limit		
The subject vehicle is owned free					
and clear of all liens Line from Schedule A/B: 3.1					
Line Hotti Schedule A/D. 3.1					
Used furniture Location: 2585 Tunnelton Bono	\$1,000.00		\$1,000.00	Ind. Code § 34-55-10-2(c)(2)	
Road, Mitchell IN 47446			100% of fair market value, up to		
Line from Schedule A/B: <b>6.1</b>			any applicable statutory limit		
Television, computer and cell phone Location: 2585 Tunnelton Bono	\$800.00		\$800.00	Ind. Code § 34-55-10-2(c)(2)	
Road, Mitchell IN 47446 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		

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Linda L Martin			Case number (if known)	18-91847-BHL	
	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
•	\$300.00		\$300.00	Ind. Code § 34-55-10-2(c)(2)	
ad, Mitchell IN 47446			100% of fair market value, up to any applicable statutory limit		
	\$20.00		\$20.00	Ind. Code § 34-55-10-2(c)(3)	
ad, Mitchell IN 47446			100% of fair market value, up to any applicable statutory limit		
_	\$300.00		\$300.00	Ind. Code § 34-55-10-2(c)(3)	
e IIOIII <i>Schedule AVD</i> . <b>17.1</b>			100% of fair market value, up to any applicable statutory limit		
, ,			led on or after the date of adjustmer	nt.)	
	ubject to adjustment on 4/01/19 and every	current value of the property and line on hedule A/B that lists this property  Seed clothing scation: 2585 Tunnelton Bono oad, Mitchell IN 47446 see from Schedule A/B: 11.1  Sish scation: 2585 Tunnelton Bono oad, Mitchell IN 47446 see from Schedule A/B: 16.1  See from Schedule A/B: 16.1  See from Schedule A/B: 17.1  See you claiming a homestead exemption of more than \$160,37 abject to adjustment on 4/01/19 and every 3 years after that for calcalate the second of the portion you own  Current value of the portion you own  Copy the value from Schedule A/B  \$300.00  \$300.00	ef description of the property and line on hedule A/B that lists this property  Copy the value from Schedule A/B  sed clothing cation: 2585 Tunnelton Bono add, Mitchell IN 47446 se from Schedule A/B: 11.1  ash cation: 2585 Tunnelton Bono add, Mitchell IN 47446 se from Schedule A/B: 16.1  see from Schedule A/B: 16.1  see from Schedule A/B: 17.1  ce you claiming a homestead exemption of more than \$160,375? subject to adjustment on 4/01/19 and every 3 years after that for cases file.	cere description of the property and line on hedule A/B that lists this property  Copy the value from Schedule A/B that lists this property  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 11.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 11.1  See from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and, Mitchell IN 47446  The from Schedule A/B: 16.1  Seed clothing coation: 2585 Tunnelton Bono and	

Fill in this information	n to identify you	r case:				
	nda L Martin	Middle Name	Last Name			
Debtor 2	, riamo	illiadio Namo	Zaot Haine			
(Spouse if, filing) Firs	st Name	Middle Name	Last Name			
United States Bankrup	tcy Court for the:	SOUTHERN DISTRICT OF	INDIANA			
Case number 18-91	847-BHL					
(if known)						if this is an
					amend	ded filing
Official Form 10	6D					
Schedule D:	Creditors	Who Have Claim	s Secured	by Property	/	12/15
		f two married people are filing to out, number the entries, and attac				
1. Do any creditors have	claims secured by	your property?				
☐ No. Check this b	oox and submit th	nis form to the court with your o	ther schedules. Yo	ou have nothing else to	report on this form.	
Yes. Fill in all of	the information b	pelow.				
Part 1: List All Sec	ured Claims					
		nore than one secured claim, list the		Column A	Column B	Column C Unsecured
much as possible, list the	claims in alphabetion	a particular claim, list the other cre cal order according to the creditor's		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	portion If any
2.1 Cascade Fund	ing	Describe the property that secu	res the claim:	\$69,186.00	\$74,000.00	\$0.00
8742 Lucent B Ste 300 Littleton, CO 8		2585 Tunnelton Bono Ro IN 47446 Lawrence Cour 3 Bedroom, 2 Bathroom Home on 3 acres As of the date you file, the clain apply.  Contingent	nty Modular			
Number, Street, City, S		☐ Unliquidated				
Who owes the debt? C	heck one.	Disputed  Nature of lien. Check all that ap	ply.			
■ Debtor 1 only □ Debtor 2 only		An agreement you made (such car loan)	n as mortgage or sec	ured		
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien	, mechanic's lien)			
☐ At least one of the deb	tors and another	■ Judgment lien from a lawsuit				
☐ Check if this claim re community debt	elates to a	Other (including a right to offset	et) Principal R	esidence-First Mor	rtgage	
Date debt was incurred	07/11/2018	Last 4 digits of account i	number <u>0911</u>			
	of your form, add	olumn A on this page. Write that the dollar value totals from all pa		\$69,18 \$69,18		
Part 2: List Others t	o Be Notified fo	r a Debt That You Already Lis	sted			
trying to collect from you	u for a debt you o	e notified about your bankruptcy we to someone else, list the cred you listed in Part 1, list the addit is page.	itor in Part 1, and th	nen list the collection ag	ency here. Similarly, if	you have more
Name, Number, St Anselmo Lind 1771 W. Diehl Naperville, IL	#120			th line in Part 1 did you er		

Official Form 106D

	Case 10-91047-ANIVI-13 D	00 0 Tiled 12/20/10	LOD 12/20/10 12.45.58	7 Fg 17 01 39
Fill in th	nis information to identify your case:			
Debtor 1	1 Linda L Martin			
		dle Name Last Name		
Debtor 2				
(Spouse if,	, filing) First Name Mid	dle Name Last Name		
United S	States Bankruptcy Court for the: SOUTH	ERN DISTRICT OF INDIANA		
Case nu	ımber <b>18-91847-BHL</b>			
(if known)				☐ Check if this is an
				amended filing
Officia	al Form 106E/F			
	dule E/F: Creditors Who Ha	vo Uneccured Claims		12/15
	mplete and accurate as possible. Use Part 1 fo		Dowt 2 for any distance with MONDRIORI	
Schedule Schedule left. Attac	utory contracts or unexpired leases that could G: Executory Contracts and Unexpired Lease D: Creditors Who Have Claims Secured by Presh the Continuation Page to this page. If you held case number (if known).	es (Official Form 106G). Do not include operty. If more space is needed, copy	any creditors with partially secured the Part you need, fill it out, number	claims that are listed in the entries in the boxes on the
Part 1:	List All of Your PRIORITY Unsecured	Claims		
1. Do a	iny creditors have priority unsecured claims a	gainst you?		
	lo. Go to Part 2.			
ΠY	es.			
Part 2:	List All of Your NONPRIORITY Unsecu	ured Claims		
4. List unse	Io. You have nothing to report in this part. Submit 'es.  all of your nonpriority unsecured claims in the sourced claim, list the creditor separately for each cone creditor holds a particular claim, list the othe	e alphabetical order of the creditor who claim. For each claim listed, identify what	o holds each claim. If a creditor has m type of claim it is. Do not list claims alre	ady included in Part 1. If more
Part		r creditors in Fart 3.11 you have more than	i tillee nonphonty unsecured claims illi	out the Continuation Fage of
				Total claim
4.1	Cap One Auto	Last 4 digits of account number	1001	\$5,463.00
	Nonpriority Creditor's Name	_	0 10/00/44 1 14 4 4	
	Po Box 259407	When was the debt incurred?	Opened 9/03/11 Last Activ 10/03/18	/e
_	Plano, TX 75025			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you di	d not
	No	Debts to pension or profit-sharir	on plans, and other similar debts	
		•	• •	
	Yes	Other. Specify Deficiency	parance for auto	

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Debto	or 1 Linda L Martin		Case number (if known) 18-91847-BHL	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	7958	\$340.00
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 8/16/18 Last Active 10/04/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim		
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	$\square$ Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Creditonebnk	Last 4 digits of account number	4551	\$225.00
	Nonpriority Creditor's Name		Opened 10/06/17 Last Active	
	Po Box 98872 Las Vegas, NV 89193	When was the debt incurred?	8/01/18	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	I	
4.4	Diversified	Last 4 digits of account number	6188	\$372.00
	Nonpriority Creditor's Name  10550 Deerwood Park Blvd	When was the debt incurred?	Opened 7/30/18	
	Jacksonville, FL 32256  Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	в. Спеск ан так арру	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?		aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other Specify 11 Comcas	t	
	<del></del>	- Other Specify	-	

Official Form 106 E/F

### Case 18-91847-AKM-13 Doc 8 Filed 12/20/18 EOD 12/20/18 12:43:39 Pg 19 of 39

Debtor 1	Linda L M	Martin		Case nu	mber (if known)	18-91847-BHL	
	Fst Premier		Last 4 digits of account number	9282			\$562.00
;	3820 N Lou Sioux Falls	ise Ave	When was the debt incurred?	Open- 1/01/1	ed 8/05/14 L 6	ast Active	
		City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	all that apply		
	■ Debtor 1 on	lv	☐ Contingent				
	Debtor 2 onl	lv	☐ Unliquidated				
	☐ Debtor 1 and	•	☐ Disputed				
		of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	_	is claim is for a community	☐ Student loans				
	debt		☐ Obligations arising out of a sepa	aration agr	eement or divorce	that you did not	
I	Is the claim su	bject to offset?	report as priority claims				
	No		Debts to pension or profit-sharing	ng plans, a	and other similar de	ebts	
	☐ Yes		Other. Specify Credit Card	t			
4.6	I C System		Last 4 digits of account number	2448			\$304.00
	Nonpriority Cred Po Box 643 Saint Paul,	78	When was the debt incurred?	Open	ed 4/11/17		
Ī	Number Street	City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	all that apply		
	Debtor 1 onl	ly	☐ Contingent				
	Debtor 2 onl	ly	☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if thi	is claim is for a community	☐ Student loans				
	debt Is the claim su	bject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agr	eement or divorce	that you did not	
	■ No		Debts to pension or profit-sharing	ng plans, a	and other similar de	ebts	
	☐ Yes		Other. Specify 11 Att Direct	ctv			
Part 3:		s to Be Notified About a Debt	•				
is tryin have m	g to collect fro ore than one c	m you for a debt you owe to son	out your bankruptcy, for a debt that y neone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page.	Parts 1 c	or 2, then list the	collection agency here	. Similarly, if you
Part 4:		mounts for Each Type of Uns					
	ne amounts of unsecured cla		s. This information is for statistical r	eporting	purposes only. 20	8 U.S.C. 9159. Add the	amounts for each
					Total	Claim	
Te	6a. otal	Domestic support obligations		6a.	\$	0.00	
clai from Pa	ims irt 1 6b.	Taxes and certain other debts	you owe the government	6b.	\$	0.00	
nom ra	6c.		jury while you were intoxicated	6c.	\$	0.00	
	6d.	· · · · · · · · · · · · · · · · · · ·	cured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a throu	igh 6d.	6e.	\$	0.00	
					<b>T</b> ., •	Claim	
	6f.	Student loans		6f.	\$	0.00	
	otal						
clai from Pa	ims irt 2 6g.	Obligations arising out of a ser	paration agreement or divorce that			0.00	
	J.	you did not report as priority c	laims	6g.	\$	0.00	
	6h.	Debts to pension or profit-shar	ing plans, and other similar debts	6h.	\$	0.00	

Official Form 106 E/F

Other. Add all other nonpriority unsecured claims. Write that amount

6i.

6i.

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Debtor 1 Linda L Martin		Case nu	Case number (if known)			
		here.			7,266.00	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6ј.	\$	7,266.00	

Official Form 106 E/F

Fill in this infor	mation to identify your	case:		
Debtor 1	Linda L Martin			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA	
Case number	18-91847-BHL			
(if known)	TO OTOTI BILE			Check if this is an amended filing

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Cricket 1440 Veterans Pkwy #300 Clarksville, IN 47129	Cell phone

## Case 18-91847-AKM-13 Doc 8 Filed 12/20/18 EOD 12/20/18 12:43:39 Pg 22 of 39

Debtor 1					
	Linda L Martin				
<b>D</b> 1 ( )	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA		
Case num	ber <b>18-91847-BHL</b>				
(if known)	10 01047 BILE				☐ Check if this is an
					amended filing
Sched	I Form 106H  Jule H: Your Coc  s are people or entities who		ots you may have. Be a	s complete and accura	12/15
eople are	e filing together, both are eq	ually responsible for supp e boxes on the left. Attach	olying correct information the Additional Page	tion. If more space is ne	eded, copy the Additional Page, of any Additional Pages, write
1. Do	you have any codebtors? (I	f you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
	hin the last 8 years, have yo na, California, Idaho, Louisiana				states and territories include
	. Go to line 3.				
☐ Yes  3. In Colin line	s. Did your spouse, former spo lumn 1, list all of your codeb e 2 again as a codebtor only	otors. Do not include your if that person is a guaran	e with you at the time? spouse as a codebto tor or cosigner. Make	if your spouse is filing sure you have listed the	with you. List the person showr e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi
3. In Colin line	s. Did your spouse, former spo lumn 1, list all of your codeb e 2 again as a codebtor only	otors. Do not include your if that person is a guaran	e with you at the time? spouse as a codebto tor or cosigner. Make	if your spouse is filing sure you have listed the	
3. In Col in line Form out Co	s. Did your spouse, former spo lumn 1, list all of your codek e 2 again as a codebtor only 106D), Schedule E/F (Officia	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filing sure you have listed th 06G). Use Schedule D, S	e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi ditor to whom you owe the debt
Yes  3. In Col in line Form out Co	s. Did your spouse, former spource.  lumn 1, list all of your codes e 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.  Column 1: Your codebtor	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	if your spouse is filing sure you have listed the 06G). Use Schedule D, S Column 2: The cree	e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi ditor to whom you owe the debt
3. In Col in line Form out Co	s. Did your spouse, former spouge.  lumn 1, list all of your codes e 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.  Column 1: Your codebtor Name, Number, Street, City, State and 2.	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filing sure you have listed the DGG). Use Schedule D, S  Column 2: The cree Check all schedules  Schedule D, line	e creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi ditor to whom you owe the debt s that apply:
3. In Col in line Form out Co	s. Did your spouse, former spource.  lumn 1, list all of your codes e 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.  Column 1: Your codebtor	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filing sure you have listed the DGG). Use Schedule D, S  Column 2: The cree Check all schedules  Schedule D, line Schedule E/F, lire	e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the debt of the deb
Yes  3. In Col in line Form out Co	s. Did your spouse, former spoulumn 1, list all of your codes a 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and State of Street, City, State and Street, City, State of Street, C	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filing sure you have listed the DGG). Use Schedule D, S  Column 2: The cree Check all schedules  Schedule D, line	e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the debt of the deb
Yes  3. In Col in line Form out Co	s. Did your spouse, former spouge.  lumn 1, list all of your codes e 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.  Column 1: Your codebtor Name, Number, Street, City, State and 2.	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time? spouse as a codebto tor or cosigner. Make	r if your spouse is filing sure you have listed the DGG). Use Schedule D, S  Column 2: The cree Check all schedules  Schedule D, line Schedule E/F, lire	e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the debt of the deb
3. In Col in line Form out Co	s. Did your spouse, former spoulumn 1, list all of your codes a 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Street  *Number** Number** Street**	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time?  spouse as a codebtor tor or cosigner. Make ule G (Official Form 10	r if your spouse is filing sure you have listed the 16G). Use Schedule D, S  Column 2: The cree Check all schedules  Schedule D, line Schedule E/F, lire Schedule G, line	e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the find that apply:
3. In Col in line Form out Co	s. Did your spouse, former spouse.  Iumn 1, list all of your codes a 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.  Column 1: Your codebtor Name, Number, Street, City, State and Street City	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time?  spouse as a codebtor tor or cosigner. Make ule G (Official Form 10	r if your spouse is filing sure you have listed the DGG). Use Schedule D, S  Column 2: The cree Check all schedules  Schedule D, line Schedule E/F, line Schedule G, line	e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the debt of the deb
3. In Col in line Form out Co	s. Did your spouse, former spoulumn 1, list all of your codes a 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.  **Column 1: Your codebtor** Name, Number, Street, City, State and Street  *Number** Number** Street**	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time?  spouse as a codebtor tor or cosigner. Make ule G (Official Form 10	r if your spouse is filing sure you have listed the DGG). Use Schedule D, S  Column 2: The cree Check all schedules  Schedule D, line Schedule G, line  Schedule D, line	e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the debt of the deb
3. In Col in line Form out Co	s. Did your spouse, former spouse.  Iumn 1, list all of your codes a 2 again as a codebtor only 106D), Schedule E/F (Official olumn 2.  Column 1: Your codebtor Name, Number, Street, City, State and Street City	otors. Do not include your if that person is a guaran al Form 106E/F), or Sched	e with you at the time?  spouse as a codebtor tor or cosigner. Make ule G (Official Form 10	r if your spouse is filing sure you have listed the DGG). Use Schedule D, S  Column 2: The cree Check all schedules  Schedule D, line Schedule E/F, line Schedule G, line	e creditor on Schedule D (Official Schedule E/F, or Schedule G to find the find the first schedule G to

Fill	in this information to identify your ca	ase:		
Del	otor 1 Linda L Mar	tin		
	otor 2			
Uni	ted States Bankruptcy Court for the	: SOUTHERN DISTRIC	CT OF INDIANA	
	se number 18-91847-BHL			Check if this is:  An amended filing  A supplement showing postpetition chapter 13 income as of the following date:
0	fficial Form 106I			MM / DD/ YYYY
Be a sup spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. (	sible. If two married peo are married and not filir r spouse is not filing wi On the top of any additi	ng jointly, and your spouse is living ith you, do not include information onal pages, write your name and c	d Debtor 2), both are equally responsible for g with you, include information about your about your spouse. If more space is needed, ase number (if known). Answer every question.  atic stress disorder and
os	teoporosis, she red	quires freque	nt, continuous treati	ment.
Th	e Debtor was not r	equired to file	2017 income tax re	turns.
de	emonstrate feasibiline Debtor will fund	ty.	_	s included in schedule I to
Pai	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	<ul><li>✓ Employed</li><li>☐ Not employed</li></ul>	☐ Employed ☐ Not employed
	employers.	Occupation	Cashier	
	Include part-time, seasonal, or self-employed work.	Employer's name	Wal-mart Associates Inc	
	Occupation may include student or homemaker, if it applies.	Employer's address	702 S.W. 8th Street \$11.00 per hour paid biweekl Avg Net Income \$725.93 Bentonville, AR 72716	у
		How long employed the	here? 01/2018	
Pai	t 2: Give Details About Mon	nthly Income		
	mate monthly income as of the dause unless you are separated.	ate you file this form. If y	you have nothing to report for any line	e, write \$0 in the space. Include your non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information for all employe	ers for that person on the lines below. If you need

Official Form 106I Schedule I: Your Income page 1

Debtor 1 Linda L Martin		_	Case number (if known)		18-91847-BHL		
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	1,936.00	\$	N/A	

Deb	tor 1	Linda L Martin		С	Case number (if known)	18-91847-	BHL	
	_		-					
					For Debtor 1	For Debto	r 2 or	
						non-filing	-	
	Cop	y line 4 here	4.		\$ 1,936.00	\$	N/A	_
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$ 364.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.		\$ 0.00	\$	N/A	=
	5c.	Voluntary contributions for retirement plans	5c.		\$ 0.00	\$	N/A	-
	5d.	Required repayments of retirement fund loans	5d.		\$ 0.00	\$	N/A	-
	5e.	Insurance	5e.		\$ 0.00	\$	N/A	_
	5f.	Domestic support obligations	5f.		\$ 0.00	\$	N/A	-
	5g.	Union dues	5g.		\$ 0.00	\$	N/A	_
	5h.	Other deductions. Specify:	5h.	.+	\$ 0.00	+ \$	N/A	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9	\$ 364.00	\$	N/A	_
7.	Calc	sulate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	\$ 1,572.00	\$	N/A	_
8.	List	all other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm						
		Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$ 0.00	\$	N/A	
	8b.	Interest and dividends	8b.		\$ 0.00	\$	N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent	OD.	•	Ψ	Ψ	IVA	-
	00.	regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.		\$0.00	\$	N/A	_
	8d.	Unemployment compensation	8d.		\$ 0.00	\$	N/A	_
	8e.	Social Security	8e.		\$ 500.00	\$	N/A	
	8f.	Other government assistance that you regularly receive						
		Include cash assistance and the value (if known) of any non-cash assistance						
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
		Specify:	8f.		\$ 0.00	\$	N/A	
	8g.	Pension or retirement income	– 8g.		\$ 0.00	\$	N/A	_
	8h.	Other monthly income. Specify:	8h.		, 0.00	+ \$	N/A	_
	011.			··	Ψ <u> </u>	. —	14/5	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	500.00	\$	N/A	A
			Г				1 [	
10.	Calc	culate monthly income. Add line 7 + line 9.	10.   9	\$	2,072.00 + \$	N/A	<b>\</b>   =   \$	2,072.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	State	e all other regular contributions to the expenses that you list in Schedule	J.					
		de contributions from an unmarried partner, members of your household, your		nde	ents, your roommate:	s, and		
		r friends or relatives.						
		ot include any amounts already included in lines 2-10 or amounts that are not a	availa	able	to pay expenses list			
	Spec	OITY:					. +\$	0.00
12	V 44	the amount in the last column of line 10 to the amount in line 11. The res	ult ic s	tho	combined monthly is	ncome		
12.		e that amount on the Summary of Schedules and Statistical Summary of Certai						
	appli	•	II LIGI	Oma	ico ana ricialea Dall	12.	. \$	2,072.00
							Combi	ned y income
13	Do v	rou expect an increase or decrease within the year after you file this form	?				monum	y income
	<b>y</b>	No.	•					
	Ħ	Yes, Explain:						

-#II	in this information to identify your case:				
Deb	Linda L Martin			k if this is: An amended filing	
	otor 2ouse, if filing)			•	ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: SOUTHERN DISTRICT OF INDIA	ANA	1	MM / DD / YYYY	
	enumber 18-91847-BHL (nown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married people at ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Pari	t 1: Describe Your Household Is this a joint case?				
	✓ No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?				
	No Yes. Debtor 2 must file Official Form 106J-2, Expense.	s for Separate House	ehold of Debt	or 2.	
2.	Do you have dependents?    No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No
	dependents names.				∐ Yes □ No
					Yes
					∐ No □ Yes
					No
3.	Do your expenses include expenses of people other than yourself and your dependents?				∐ Yes
Par	t 2: Estimate Your Ongoing Monthly Expenses				
Est exp	timate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a suppolicable date.				
	lude expenses paid for with non-cash government assistance i				
	e value of such assistance and have included it on <i>Schedule I:</i> Yeficial Form 106I.)	Your Income		Your expe	enses
4.	The rental or home ownership expenses residence. Include first mortgage paymerent for the ground or lot. (The Debtor's	nts and any			
	payment is included in the petition)	mortgage	4. \$		0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	<ul><li>4c. Home maintenance, repair, and upkeep expenses</li><li>4d. Homeowner's association or condominium dues</li></ul>		4c. \$ 4d. \$		0.00 0.00
5.	Additional mortgage payments for your residence, such as ho	ome equity loans	5. \$		0.00

ebtor 1 Linda L Martin	Case number (if known)	18-91847-BHL
Utilities:		
6a. Electricity, heat, natural gas	6a. \$	263.00
6b. Water, sewer, garbage collection	6b. \$	50.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	85.00
6d. Other. Specify:	6d. \$	0.00
Food and housekeeping supplies	7. \$	200.00
Childcare and children's education costs	8. \$	0.00
Clothing, laundry, and dry cleaning	9. \$	75.00
). Personal care products and services	10. \$	50.00
. Medical and dental expenses	11. \$	250.00
2. <b>Transportation.</b> Include gas, maintenance, bus or train fare.		050.00
Do not include car payments.	12. \$	250.00
B. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
Charitable contributions and religious donations	14. \$	0.00
i. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.	150 ¢	0.00
15a. Life insurance	15a. \$	0.00
<sup>15b.</sup> Health insurance- Humana	15b. \$	34.00
15c. Vehicle insurance	15c. \$	60.00
15d. Other insurance. Specify:	15d. \$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16. \$	0.00
Installment or lease payments:	47- A	
17a. Car payments for Vehicle 1	17a. \$	0.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other Specify:	17c. \$	0.00
17d. Other. Specify:	17d. \$	0.00
Your payments of alimony, maintenance, and support that you did not report as	18. \$	0.00
deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).  Other payments you make to support others who do not live with you.	\$	0.00
Specify:	19.	0.00
Other real property expenses not included in lines 4 or 5 of this form or on <i>Sched</i>		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
. Other: Specify:	21. +\$	0.00
· · -	: • •	0.00
Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	1,417.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	1,417.00
Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	2,072.00
23b. Copy your monthly expenses from line 22c above.	23b\$	1,417.00
200. Copy your monthly expenses nom line 220 above.	200. Ψ	1,417.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$	655.00
4. Do you expect an increase or decrease in your expenses within the year after you For example, do you expect to finish paying for your car loan within the year or do you expect your n modification to the terms of your mortgage? Vo. Yes. Explain here:		ease or decrease because of a

Fill in this info	ormation to identify your	case:			
Debtor 1	Linda L Martin				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRIC	T OF INDIANA		
Case number	18-91847-BHL				
(if known)					☐ Check if this is an amended filing
Declara  If two married  You must file tobtaining more	people are filing together	r, both are equally resp le bankruptcy schedul n connection with a ba		rrect information. s. Making a false statem	ent, concealing property, or or imprisonment for up to 20
s	ign Below				
Did you	pay or agree to pay some	one who is NOT an att	orney to help you fill out I	bankruptcy forms?	
■ No					
☐ Yes	. Name of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the su	mmary and schedules file	ed with this declaration	and
X /s/ Li	inda L Martin		X		
	a L Martin ture of Debtor 1		Signature of	Debtor 2	
Date	December 20, 2018		Date		

	Case 18-91847-ANN-13 L	JUC 8 FII	eu 12/20/18	EUD 12/20/18 12.43.	se Py Z	.9 01 39
Fill	in this information to identify your case:					
Deb	tor 1 Linda L Martin					
	otor 2	liddle Name	Last Name			
` '	· <b>0</b> ,	liddle Name	Last Name			
Unit	red States Bankruptcy Court for the: SOUT	HERN DISTRI	CT OF INDIANA			
Cas (if kno	e number 18-91847-BHL				_	if this is an ded filing
Su	ficial Form 106Sum mmary of Your Assets and L					12/15
infor	s complete and accurate as possible. If two mation. Fill out all of your schedules first; original forms, you must fill out a new Sur Summarize Your Assets	then complete	the information on	this form. If you are filing ame		
					Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106/ 1a. Copy line 55, Total real estate, from Scho	A/B) edule A/B			. \$	74,000.00
	1b. Copy line 62, Total personal property, fro	m Schedule A/	В		. \$	5,045.00
	1c. Copy line 63, Total of all property on Sch	edule A/B			\$	79,045.00
Part	2: Summarize Your Liabilities					
						abilities you owe
2.	Schedule D: Creditors Who Have Claims Se 2a. Copy the total you listed in Column A, Ar				\$	69,186.00
3.	Schedule E/F: Creditors Who Have Unsecur 3a. Copy the total claims from Part 1 (priority			Schedule E/F	. \$	0.00
	3b. Copy the total claims from Part 2 (nonpr	iority unsecure	d claims) from line 6j	of Schedule E/F	. \$	7,266.00
				Your total liabilitie	\$	76,452.00
Part	3: Summarize Your Income and Expens	es				
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from lin		ule I		\$	2,072.00
5.	Schedule J: Your Expenses (Official Form 10 Copy your monthly expenses from line 22c of				\$	1,417.00
Part	4: Answer These Questions for Adminis	strative and St	atistical Records			
6.	Are you filing for bankruptcy under Chapt  No. You have nothing to report on this p			submit this form to the court with	your other sch	edules.
7.	■ Yes What kind of debt do you have?					

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Linda L Martin Case number (if known) 18-91847-BHL

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_1,607.57

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total clair	m
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

R&R (rev 06/08/15)

# UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF INDIANA

Case Name: Linda L Martin Case No. 18-91847-BHL

## RIGHTS AND RESPONSIBILITIES OF CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

It is important for debtors who file a bankruptcy case under Chapter 13 to understand their rights and responsibilities. It is also important that debtors know what their attorney's responsibilities are and understand the importance of communicating with their attorney to make the case successful. Debtors should also know that they may expect certain services to be performed by their attorney. In order to assure that debtors and attorneys understand their rights and responsibilities in the bankruptcy process, the following guidelines provided by the Court are hereby agreed to by the debtors and their attorney.

#### BEFORE THE CASE IS FILED

#### The debtor agrees to:

- 1. Provide the attorney with complete, accurate and current financial information.
- 2. Discuss with the attorney the debtor's objectives in filing the case.
- 3. Disclose any previous bankruptcies filed in the previous 8 years.
- 4. Unless excused under 11 U.S.C. § 109(h), receive a briefing from an approved nonprofit budget and credit counseling agency and provide the attorney with a copy of the certificate from the agency showing such attendance, as well as a copy of the debt repayment plan, if any, developed through the agency.
  - 5. Disclose to the attorney any and all domestic support obligations.

#### The attorney agrees to:

- 1. Meet with the debtor to review the debtor's debts, assets, liabilities, income and expenses.
- 2. Counsel the debtor regarding the advisability of filing either a Chapter 7 or Chapter 13 case, provide debtor with the notice required under 11 U.S.C. § 342(b) if applicable, discuss both procedures with the debtor and answer the debtor's questions.
- 3. Explain what payments will be made to creditors directly by the debtor and what payments will be made through the Chapter 13 plan, with particular attention to mortgage and vehicle loan payments, any other debts that accrue interest, domestic support obligations and leases.
- 4. Explain to the debtor how, when and where to make payments, pursuant to the plan, to the Chapter 13 trustee and of the necessity to include the debtor's case number, name and current address on each payment item.
- 5. Explain to the debtor how the attorney and trustee's fees are paid and provide an executed copy of this document to the debtor.
- 6. Explain to the debtor that the first payment due under Chapter 13 must be made to the trustee within 30 days of filing of the bankruptcy petition.
- 7. Advise the debtor of the requirement to attend the Section 341 Meeting of Creditors and instruct the debtor as to the date, time and place of the meeting and of the necessity to bring both picture identification and proof of the debtor's social security number to the meeting.
- 8. Advise the debtor of the necessity of maintaining liability, collision and comprehensive insurance on leased vehicles or those securing loans, and of the obligation to bring copies of the declaration page(s) documenting such insurance to the Meeting of Creditors.
- 9. Advise debtors engaged in business of the necessity to maintain liability insurance, workers compensation insurance, if required, and any other insurance coverage required by law.
- 10. Timely prepare and file the debtor's petition, plan, statements, schedules, and any other papers or documents required under the Bankruptcy Code.

Case Name: Linda L Martin Case No.18-91847-BHL

#### AFTER THE CASE IS FILED

#### The debtor agrees to:

- 1. Timely make all required payments to the Chapter 13 trustee that first become due 30 days after the case is filed. Also, if required, turn over any tax refunds, personal injury settlement proceeds or any other property as requested by the trustee.
- 2. Timely make all post-petition payments due to mortgage lenders, holders of domestic support obligations, lessors, and any other creditor that debtor agreed or is obligated to pay directly.
  - 3. Cooperate with the attorney in the preparation of all pleadings and attend all hearings as required.
  - 4. Keep the trustee, attorney and Court informed of any changes to the debtor's address and telephone number.
  - 5. Prepare and file any and all federal, state and local tax returns within 30 days of filing the petition.
- 6. Inform the attorney of any wage garnishments or attachments of assets which occur or continue to occur after the filing of the case.
- 7. Contact the attorney promptly with any information regarding changes in employment, increases or decreases in income or other financial problems or changes.
- 8. Contact the attorney promptly if the debtor acquires any property after the petition is filed. Such property might include, but is not limited to, personal injury proceeds, inheritances, lottery winnings, etc.
  - 9. Inform the attorney if the debtor is sued during the case.
- 10. Inform the attorney if any tax refunds to which the debtors are entitled are seized or not returned to the debtor by the IRS, the Indiana Department of Revenue or any other taxing authority.
- 11. Contact the attorney to determine whether court approval is required before buying, refinancing or selling real property or before entering into any long-term loan agreement.
  - 12. Pay any filing fees and courts costs directly to the attorney.
- 13. If the requirements of 11 U.S.C. § 109(h) were waived by the Court when the case was first filed, receive a briefing from an approved nonprofit budget and credit counseling agency within 30 days of the case being filed (unless the Court, for cause, extends such time) and provide counsel with the certificate from the agency stating that the debtor attended such briefing.
- 14. Unless such attendance is excused under 11 U.S.C. § 1328(f), complete an instructional course concerning personal financial management and shall promptly submit to the debtor's attorney a signed and completed Certification of Completion of Instruction Course Concerning Personal Financial Management.
  - 15. Cooperate fully with any audit conducted pursuant to 28 U.S.C. § 586(a).
- 16. After all plan payments have been made, and if the debtor is eligible for a discharge, timely provide counsel with the information needed to complete any documents required by the Court before a discharge will be entered.

#### The attorney agrees to provide the following legal services:

- 1. Appear at the Section 341 Meeting of Creditors with the debtor.
- 2. Respond to objections to plan confirmation and, where necessary, prepare an amended plan.
- 3. Timely submit properly documented profit and loss statements, tax returns and proof of income when requested by the trustee.
  - 4. Prepare, file and serve necessary modifications to the plan.
- 5. Prepare, file and serve necessary amended statements and schedules, in accordance with information provided by the debtor.
  - 6. Prepare, file and serve necessary motions to buy, sell or refinance property when appropriate.
  - 7. Object to improper or invalid claims, if necessary, based upon documentation provided by the debtor or trustee.
  - 8. Represent the debtor in motions for relief from stay and motions to dismiss and/or convert.
  - 9. Where appropriate, prepare, file, serve and notice motions to avoid liens on real or personal property.
  - 10. Where appropriate, prepare, file and serve a summons and complaint to avoid a wholly unsecured mortgage.
  - 11. Be available to respond to debtor's questions throughout the life of the plan.
- 12. Negotiate with any creditor holding a claim against the debtor that is potentially nondischargeable to determine if the matter can be resolved prior to litigation. Discuss with debtor the cost and advisability of litigating the dischargeability of the claim. The attorney is not required, however, to represent the debtor in any adversary proceeding to determine the nondischargeability of any debt pursuant to these Rights and Responsibilities.
  - 13. Represent the debtor with respect to any audit conducted pursuant to 28 U.S.C. § 586(a).
  - 14. Negotiate all reaffirmation agreements and appear with the debtor at any hearing on same.

#### Case 18-91847-AKM-13 Doc 8 Filed 12/20/18 EOD 12/20/18 12:43:39 Pg 33 of 39

Case Name: Linda L Martin

Case No.18-91847-BHL

15. After all plan payments have been made, and if the debtor is eligible for a discharge, prepare, file and serve any documents required by the Court before a discharge will be entered.

The total fee charged in this case is \$4,000.00. If this fee later proves to be insufficient to compensate the attorney for the legal service rendered in the case, the attorney has the right to apply to the court for any additional attorney fees. Fees shall be paid through the plan unless otherwise ordered. The attorney may not receive additional fees directly from the debtor other than the initial retainer. If an attorney has elected to be compensated pursuant to these guidelines, but the case is dismissed prior to confirmation of the plan, absent contrary order, the trustee shall pay to the attorney, to the extent funds are available, an administrative claim equal to 50% of the unpaid fee balance if a properly documented fee claim (for the entire fee balance) has been filed by the attorney and served upon the trustee.

## Case 18-91847-AKM-13 Doc 8 Filed 12/20/18 EOD 12/20/18 12:43:39 Pg 34 of 39

Case Name: Linda L Martin Case No.18-91847-BHL

If the debtor disputes the legal services provided or the fees charged by the attorney, an objection must be filed with the Court.

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court** Southern District of Indiana

In 1	re	Linda L Mart	in			Case No.	18-91847-BHL
					Debtor(s)	Chapter	13
					ENSATION OF ATTORN		` ,
1.	cor	npensation paid	to me v	within one year before the fi	16(b), I certify that I am the attorney aling of the petition in bankruptcy, or on of or in connection with the bankruptcy.	agreed to be paid	to me, for services rendered or to
		For legal servi	ces, I h	ave agreed to accept		\$	4,000.00
		Prior to the fil	ing of th	his statement I have receive	ed	\$	0.00
		Balance Due				\$	4,000.00
2.	The	e source of the c	ompens	sation paid to me was:			
		Debtor		Other (specify):			
3.	The	e source of comp	ensatio	on to be paid to me is:			
		Debtor		Other (specify):			
4.		I have not agree	ed to sh	nare the above-disclosed cor	mpensation with any other person un	less they are memb	pers and associates of my law firm.
					nsation with a person or persons who names of the people sharing in the co		
5.	In	return for the ab	ove-dis	sclosed fee, I have agreed to	render legal service for all aspects of	of the bankruptcy ca	ase, including:
	b. c. d.	Preparation and Representation	filing of of the doof the d	of any petition, schedules, so lebtor at the meeting of cred lebtor in adversary proceedi	ndering advice to the debtor in determ tatement of affairs and plan which m litors and confirmation hearing, and ings and other contested bankruptcy	ay be required; any adjourned hear	
6.	Ву	agreement with	the deb	otor(s), the above-disclosed	fee does not include the following se	ervice:	
					CERTIFICATION		
this		ertify that the for kruptcy proceed		is a complete statement of	any agreement or arrangement for pa	ayment to me for re	epresentation of the debtor(s) in
	Dec	ember 20, 201	8		/s/ Lloyd E. Koehler		w
	Date	2			Lloyd E. Koehler, A Signature of Attorney	ttorney at Law	
					Koehler Law Office		
					400 Pearl Street Suite 200		
					New Albany, IN 471	50	
					812-949-2211 Fax:	812-941-3907	
					Iloydkoehler@hotm  Name of law firm	nail.com	
					name oj iaw jirm		

## **United States Bankruptcy Court** Southern District of Indiana

In re	Linda L Martin		Case No.	18-91847-BHL	
		Debtor(s)	Chapter	13	
	VERIFICA	TION OF CREDITOR	MATRIX		
Γhe ab	ove-named Debtor hereby verifies that the a	ttached list of creditors is true and c	correct to the best	of his/her knowledge.	

/s/ Linda L Martin Linda L Martin Signature of Debtor

Date: **December 20, 2018** 

ANSELMO LINDBERG OLIVER, LLC 1771 W. DIEHL #120 NAPERVILLE, IL 60563

CAP ONE AUTO
PO BOX 259407
PLANO, TX 75025

CAPITAL ONE 15000 CAPITAL ONE DR RICHMOND, VA 23238

CASCADE FUNDING MORTGAGE 8742 LUCENT BOULEVARD STE 300 LITTLETON, CO 80129

CREDITONEBNK
PO BOX 98872
LAS VEGAS, NV 89193

DIVERSIFIED 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL 32256

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS, SD 57107 I C SYSTEM
PO BOX 64378
SAINT PAUL, MN 55164

Fill in this information to identify your case:					
Debtor 1	Linda L Martin				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF INDIANA		
Case number	18-91847-BHL				
(if known)					

#### Official Form 423

## **Certification About a Financial Management Course**

12/15

If you are an individual, you must take an approved course about personal financial management if:

- you filed for bankruptcy under chapter 7 or 13, or
- you filed for bankruptcy under chapter 11 and § 1141 (d)(3) does not apply.

In a joint case, each debtor must take the course. 11 U.S.C. §§ 727(a)(11) and 1328(g).

After you finish the course, the provider will give you a certificate. The provider may notify the court that you have completed the course. If the provider does notify the court, you need not file this form. If the provider does not notify the court, then Debtor 1 and Debtor 2 must each file this form with the certificate number before your debts will be discharged.

- If you filed under chapter 7 and you need to file this form, file it within 60 days after the first date set for the meeting of creditors under § 341 of the Bankruptcy Code.
- If you filed under chapter 11 or 13 and you need to file this form, file it before you make the last payment that your plan requires or before you file a motion for a discharge under § 1141(d)(5)(B) or § 1328(b) of the Bankruptcy Code. Fed. R. Bankr. P. 1007(c).

In some cases, the court can waive the requirement to take the financial management course. To have the requirement waived, you must file a motion with the court and obtain a court order.

a motioi	n with	n the court and	d obtain a court order.
Part 1:	Tell	the Court Abo	out the Required Course.
You mu	ıst ch	eck one:	
	l co	mpleted an ap	proved course in personal financial management:
	Date	e I took the cou	rse
	Nan	ne of approved	provider
	Cert	ificate Number	
			to complete a course in personal financial management because the court has granted my er of the requirement based on <i>(check one):</i>
		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
		Disability.	My physical disability causes me to be unable to complete a course in personal financial management in person, by phone, or through the internet, even after I reasonably tried to do so.
		Active duty.	I am currently on active military duty in a military combat zone.
		Residence.	I live in a district in which the United States trustee (or bankruptcy administrator) has determined that the approved instructional courses cannot adequately meet my needs.
Part 2:	Sig	n Here	
I certify	that t	he information	I have provided is true and correct.
		L Martin debtor named or	Linda L Martin  n certificate  Linda L Martin  Printed name of debtor  Date  December 20, 2018